

# Perinatal Behaviors

*Publicly funded services to address Perinatal Behaviors are described in First Steps, Family Planning, and Nutrition Services*

## Key Findings:

### Multivitamin Use

- In 2000, PRAMS began asking mothers about multivitamin use. From 2001-2003, an estimated 54% of mothers responded they did not take multivitamins (MVI) in the month before their pregnancy. Mothers who were least likely to take multivitamins were younger or Medicaid recipients, regardless of Medicaid program.<sup>1,2,a</sup>
- American Indian/Alaska Natives, Blacks, and Hispanics were more likely than other races/ethnicities to report no multivitamin use prior to pregnancy.<sup>1,a</sup>
- The Healthy People 2010 objective is for 80% of pregnancies to begin with an optimal folic acid level.<sup>3</sup>

### Breastfeeding

- From 2001-2003, about 69% of mothers breastfed their infant for 8 or more weeks while another 9% of mothers breastfed 4-7 weeks.
- Mothers under age 20 were significantly less likely to breastfeed for 8+ weeks (about 42%), and mothers age 30 and older were significantly more likely to breastfeed 8+ weeks (about 78%) than women 20-29 years.<sup>1,a</sup>
- Black and American Indian/Alaska Native mothers were significantly less likely to breastfeed 8 or more weeks than mothers of other races/ethnicities.<sup>1,a</sup>

**Definition:** Self-reported data from the 2001-2003 Pregnancy Risk Assessment Monitoring System (PRAMS) on maternal behaviors and experiences before, during, and after pregnancy among Washington State residents who delivered live born infants. Perinatal behaviors include pre-pregnancy multivitamin use, breastfeeding, sleep position of infant, and postpartum birth control.

- TANF women were least likely to breastfeed 8+ weeks (45%) compared to women in other Medicaid programs and women not receiving Medicaid coverage.<sup>1,2</sup>
- Washington is currently meeting the Healthy People 2010 objective for 75% of mothers to breastfeed in the early postpartum period.<sup>3</sup>

### Sleep Position

- During 2001-2003, an estimated 74% of mothers said that they placed infants on their backs when they put them to sleep.<sup>1</sup>
- Black mothers were less likely than other mothers to place their babies to sleep on their backs. Mothers not receiving Medicaid were significantly more likely to place their babies on their back when they put them to sleep (about 77%) compared to Medicaid recipients, regardless of Medicaid program.<sup>1,2,a</sup>
- There was no significant difference in placing babies on their back between maternal age groups.
- Washington is currently meeting the Healthy People 2010 objective for 70% of healthy full-term babies to be put down to sleep on their backs.<sup>2</sup>

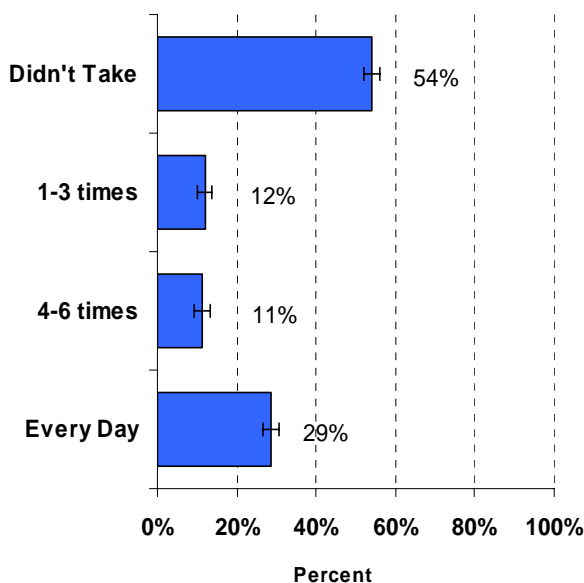
### Postpartum Birth Control

- About 85% of mothers were using birth control when surveyed 2-5 months postpartum.<sup>1</sup>
- There were no significant differences in postpartum birth control use between by maternal age or Medicaid status.<sup>1,2,a</sup>
- Among the main reasons women gave for not using postpartum birth control were they weren't having sex (34%), they didn't want to (23%), and other reasons (29%).<sup>1</sup>

## Multivitamin Use

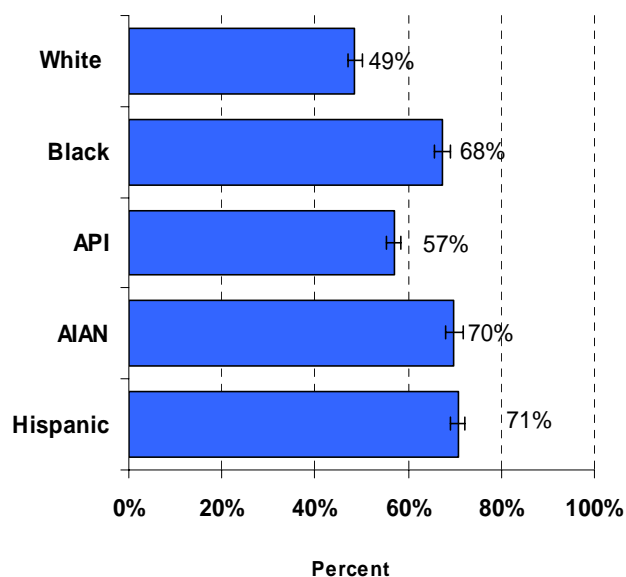
### Overall<sup>1</sup>

Pre-pregnancy Multivitamin Use  
WA, PRAMS 2001-2003



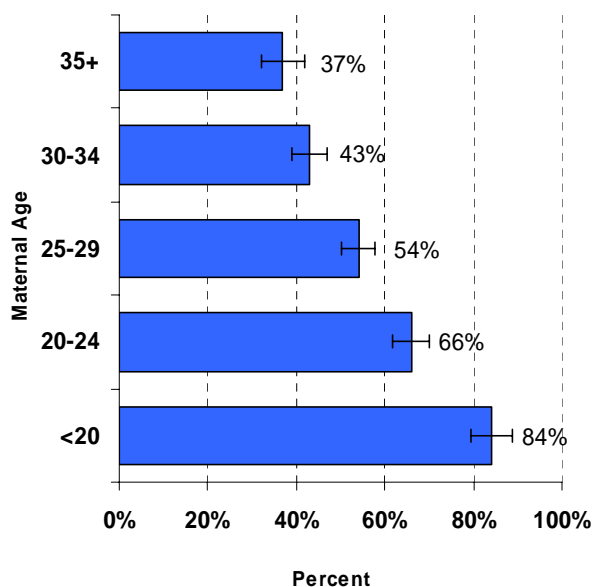
### Race and Ethnicity<sup>1,b,c</sup>

No Pre-pregnancy Multivitamin Use  
By Race/Ethnicity  
WA, PRAMS 2001-2003



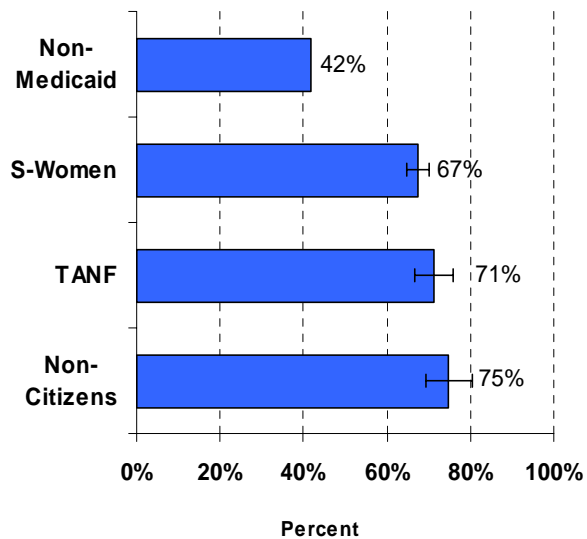
### Maternal Age<sup>1</sup>

No Pre-pregnancy Multivitamin Use  
By Age  
WA, PRAMS 2001-2003



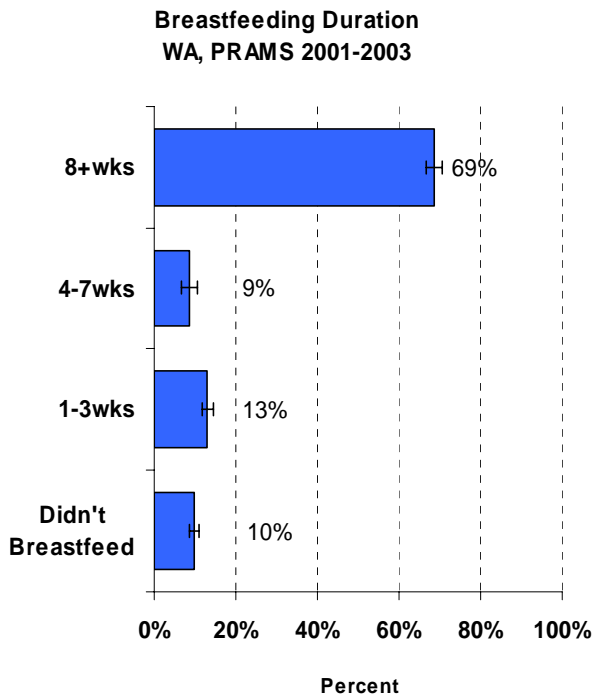
### Medicaid Status<sup>1,2,d</sup>

No Pre-pregnancy Multivitamin Use  
By Medicaid Status\*  
WA, PRAMS 2001-2003

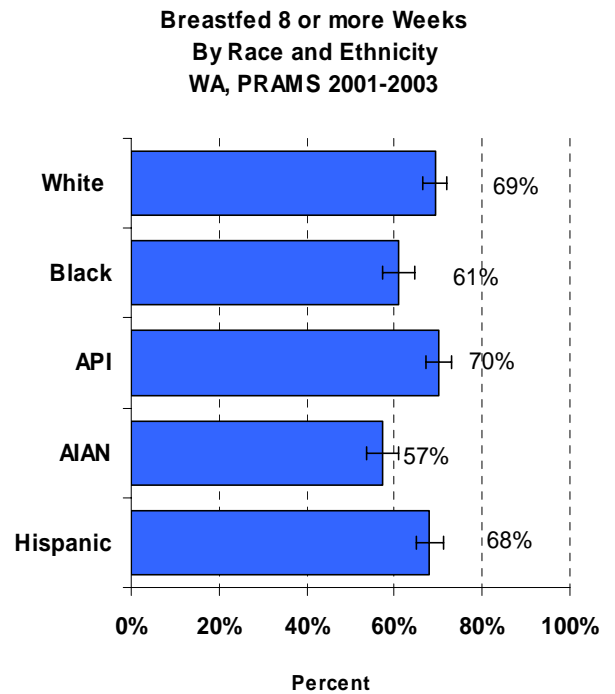


## Breastfeeding Duration

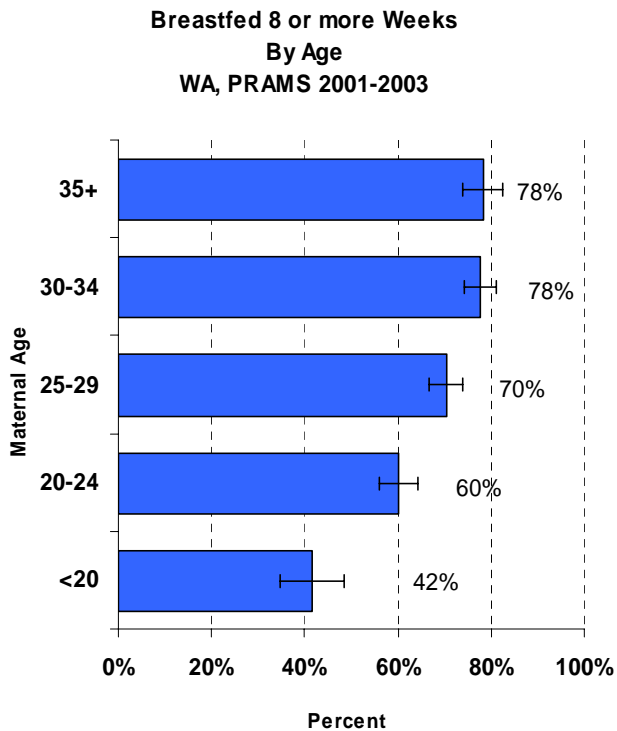
**Overall**<sup>1</sup>



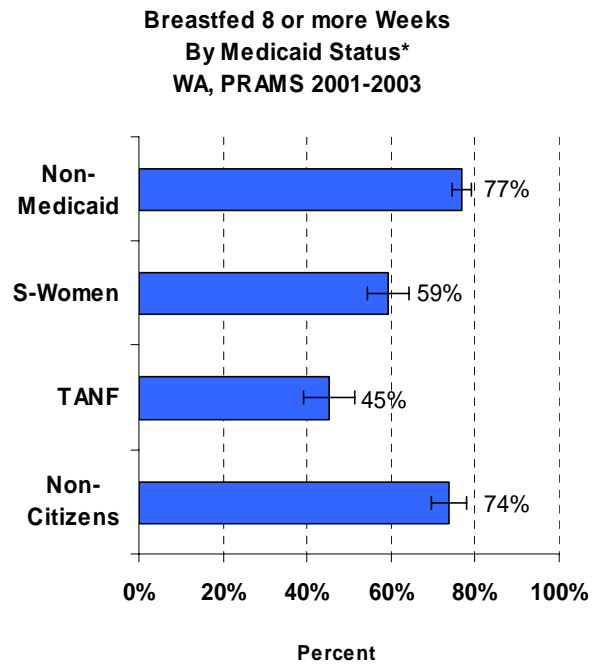
**Race/Ethnicity**<sup>1,b,c</sup>



**Maternal Age**<sup>1</sup>

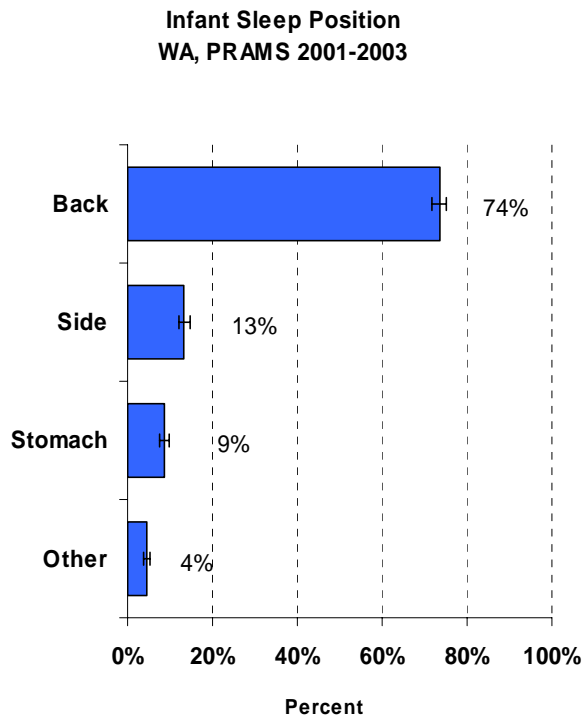


**Medicaid Status**<sup>1,2,d</sup>

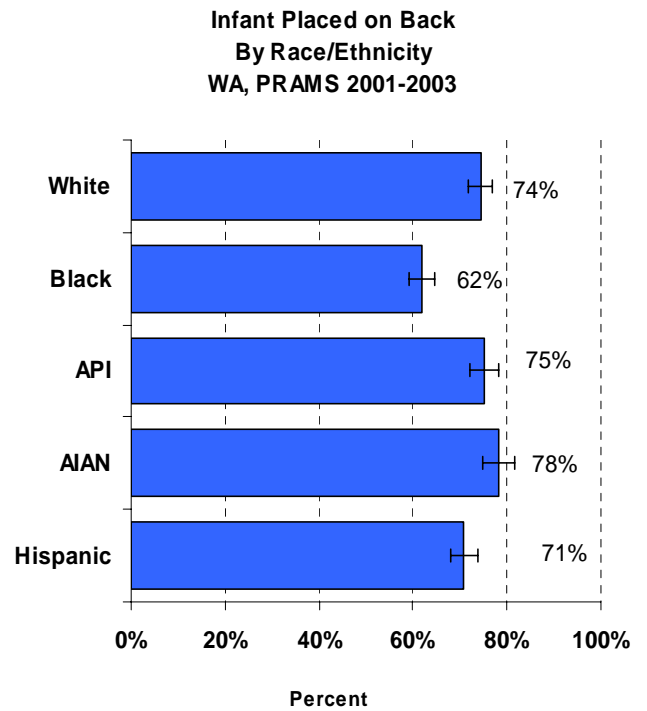


## Infant Sleep Position

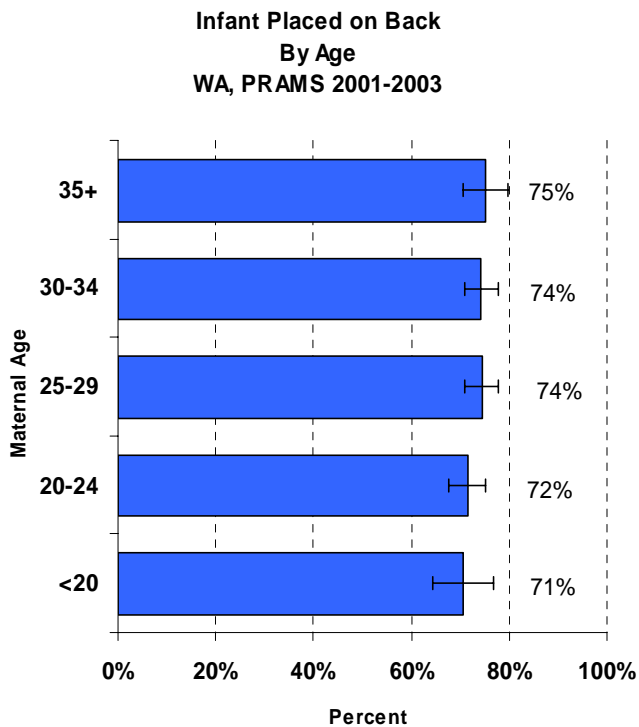
**Overall**<sup>1</sup>



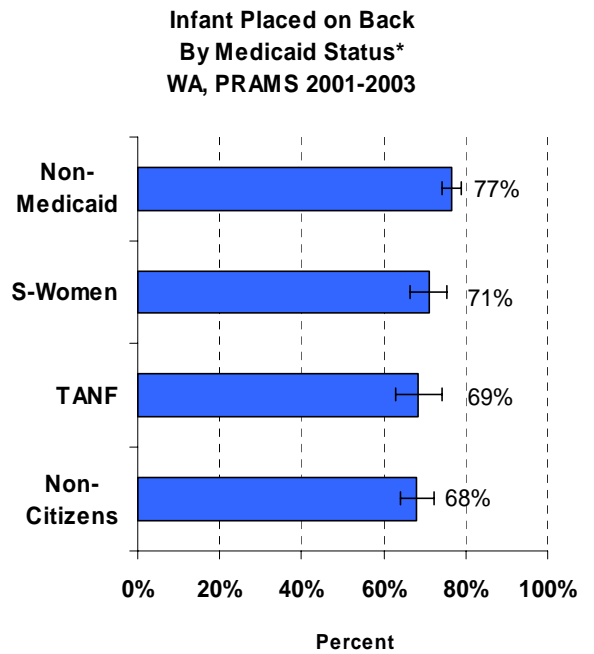
**Race and Ethnicity**<sup>1,b,c</sup>



**Maternal Age**<sup>1</sup>

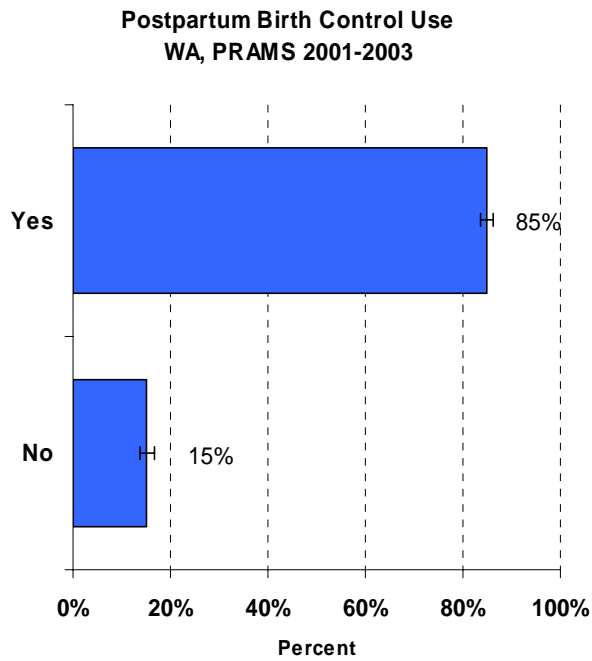


**Medicaid Status**<sup>1,2,a,d</sup>

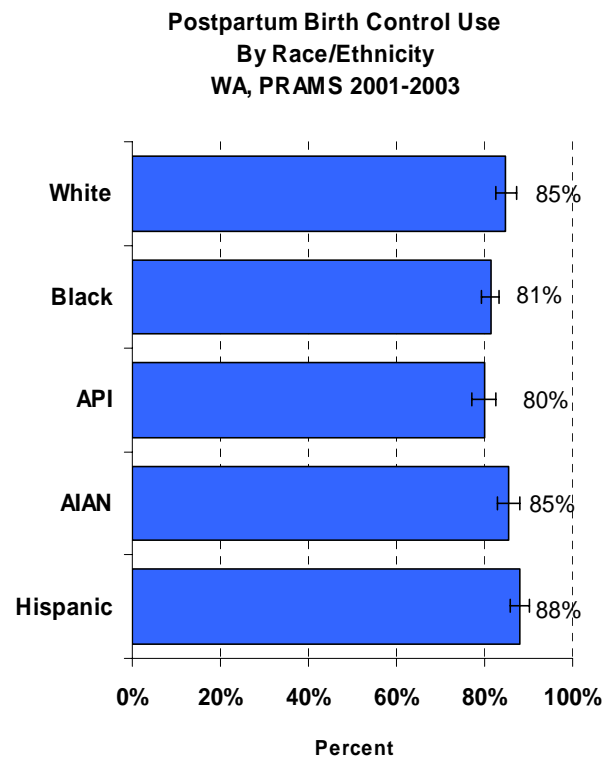


## Postpartum Birth Control

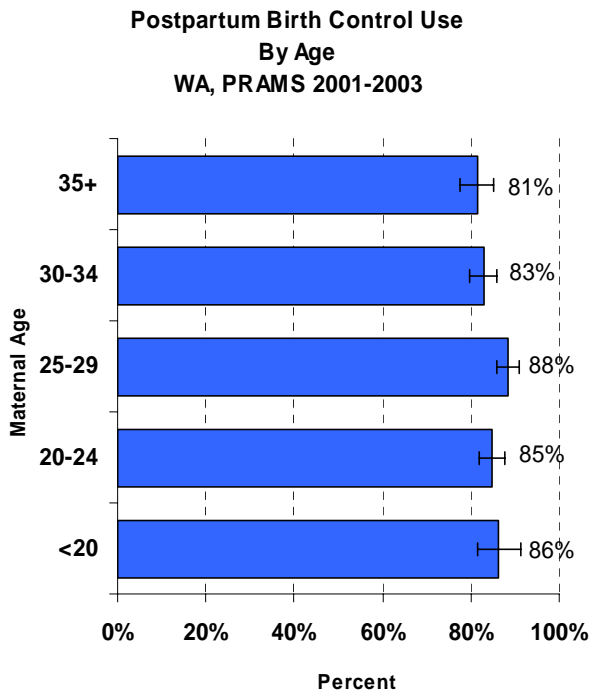
### Overall <sup>1</sup>



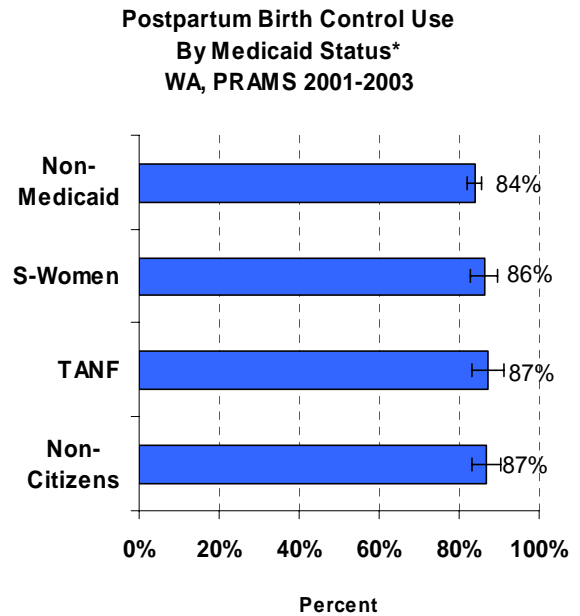
### Race and Ethnicity <sup>1,b,c</sup>



### Maternal Age <sup>1</sup>

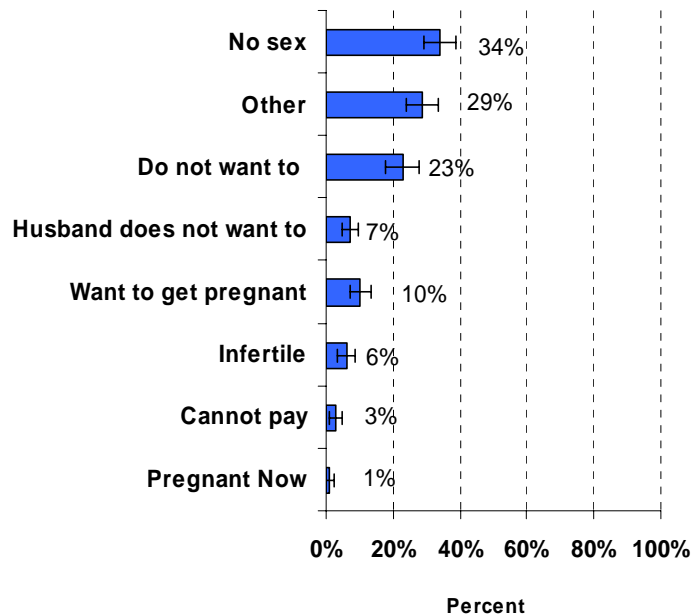


### Medicaid Status <sup>1,2,d</sup>



## *Reasons for No Birth Control Postpartum*<sup>1,a</sup>

### Reasons for Not Using Postpartum Birth Control WA, PRAMS 2001-2003\*



\*Respondents could select all responses that applied, so proportions will not add to 100%.

#### *Data Sources*

1. Washington Pregnancy Risk Assessment Monitoring System (PRAMS), 2001-2003.
2. First Steps Database. Research and Data Analysis Division, Washington State Department of Social and Health Services.
3. Department of Health and Human Services (US). Healthy People 2010: Understanding and Improving health. 2<sup>nd</sup> edition. Washington, DC: US Government Printing Office; November 2000.

#### *Endnotes*

- a. Significance was determined based on 95% Confidence Intervals
- b. AIAN – American Indian and Alaska Native
- c. API – Asian or Pacific Islander
- d. Medicaid women received maternity care paid for by Medicaid. They are divided into three major subgroups (from highest to lowest socioeconomic status): **S-Women** - those women who are citizens and eligible to receive Medicaid because they are pregnant and have incomes at or below 185% FPL, **TANF** - those women who are very low income (generally < 50% FPL) and receive cash assistance (TANF) in addition to Medicaid, and **Non-Citizens** - those women who are not citizens and are eligible to receive Medicaid because they are pregnant and have incomes at or below 185% FPL. Non-citizens are not eligible for TANF although their incomes are often lower than women on TANF. All three Medicaid groups have incomes below most Non-Medicaid women.